STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

PLEASE PRINT

RECEIVED

JUL 18 2018

| I. Name of Lobbyist(s) James Demers, Bob Blaisdell, Tom Prasol | | | 205 t 0 5018 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|-----------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | _ | | NEW HAMPSHIRE DEPARTMENT OF STATE |
| II. Name of lobbyist's partnership, firm or corpo | oration, if any: | | DEPARTMENT OF STATE |
| Demers, Blaisdell & Prasol, Inc. | | | |
| (Name of partnership, firm or corpor | • | | |
| | oncord | NH | 03301 |
| | 'own/City) | (State) | (Zip Code) |
| (603)228.1498 () | • | e-mail_Jame | s.Demers@Demers-Blaisdell.com |
| (Telephone) | (Fax) | | |
| III. This statement covers: (Choose one – file sepreportable expense transactions which are not a All reportable transactions occurring in the more | ttributable to an | y one client). | |
| (Full Name of Client as it appears to the lobbyist (incluunrelated to any particular client. | · | , | ying firm listed below which are |
| IV. Date of Report April 25, 2018 Reports cover: activity from date of registration to 3 October 31, 2018 activity from 7/1/18 to 9/30/18 | | July 25, 2018 X tivity from 4/1/18 to 6/30 January 30, 2019 (ctivity from 10/1/18 to 12 | |
| V. There have been no fees received and no If this box is checked, complete just this form and st Concord, NH 03301. | reportable trai ubmit it to the Sec | nsactions made sinc cretary of State's Offic | e the last report. Graph of |
| VI. Check if additional reports are attached: | | | |
| If you have received fees or made expenditures | , you must file A | ddendum A- Fees and | d Expenses |
| If you have paid an honorarium or reimbursed of Expense Reimbursement | expenses, you mu | ist file Addendum B- | Report of Honorariums or |
| (i) If you, your firm, or your family has made poli | tical contribution | s, you must file Adder | ndum C- Political Contributions |
| Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RS, and complete to the best of my knowledge and believed to the best of my k | A 664 and hereby ef. | swear or affirm that the $\frac{7/18}{6}$ | / |

E A S E P R N

STATE OF NEW HAMPSHIRE



Lobbyists Fees and ExpenseRECEIVED

Addendum A

JUL 1 8 2018

(RSA Chapter 15:6)

NEW HAMPSHIRE DEPARTMENT OF STATE

| I. Name of Lobbyist(s) James Demers, Tom Prasol | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| II. Name of lobbyist's partnership, firm or corporation, if any: | |
| Demers, Blaisdell & Prasol, Inc | |
| (Name of partnership, firm or corporation) | ,) |
| III. Name of Client AMGEN, INC | Date |
| IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses: | relations, or public relations services |
| a) Total of all fees received in this reporting period | a) \$ 8,000.00 b) \$ 20,000.00 |
| b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year) | b) \$ <u>20,000.00</u> ear) |
| c) Total of all fees received to date (Add lines a and b) | c) \$ 28,000.00 |
| d) Indicate the amount of any such fees that are due, but have not yet been paid | d) \$ |
| V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to rep fees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report in Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported. | client and if expenditures are made by may be filed for the lobbyist(s)/firm aggregate total of all expenses paid expenses; (b) the aggregate total of all e: meals purchased during a business as than \$10 that is given to the person ad with a value of \$25.00 or less); and arting period of greater than \$25.00 for the of greater than \$25, purchase of a er than \$25, but not greater than \$50 expense reimbursement, or political |
| a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.b) Total aggregate of expenditures during this reporting period, not reported | a) \$ |
| in a), of \$25 or less. | b) \$ |
| c) Total of all itemized expenditures reported in detail in section VI. | c) \$ |

| d) Total expenses for this reporting period (Add lines a, b and c) | d) \$ |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
| e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report) | e) \$ |
| f) Total of all expenses year to date | f) \$ |
| VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leading period, including by whom paid or to whom charged. | obbying fees during this reporting |
| Paid to: | Amount: |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | |
| | |
| | |
| Sworn Statement/Affirmation by Lobbyist | |
| I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm | n that the foregoing information |
| is true and complete to the best of my knowledge and belief. | |
| In Jamen | 7/18/18 |
| (Signature of lobbyist) | (Date) |
| James M. Deners | |
| (Print Name of lobbyist) | |